

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)							SERIAL NO. <u>70/80008</u>	FILING DATE					
							APPLICANT(S)						
							70/80008 4/16/16 CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1		51						
2				1		1	52						
3				2		2	53						
4			1		1		54						
5				1		1	55						
6			1		1		56						
7				1		1	57						
8				1		1	58						
9				3		3	59						
10				1		1	60						
11				1		1	61						
12				1		1	62						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.			3		3		TOTAL IND.						
TOTAL DEP.			12		16		TOTAL DEP.						
TOTAL CLAIMS					19		TOTAL CLAIMS						

PTO-1350 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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